File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A

Reset Form

Disclosure Board	•		IA ETHICS AND
510 E. 12 <sup>th</sup> , Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073		ONS, SEE BACK OF FORM E SUMMARY PAGE	2009 FEB 23 AM 8:
COMMITTEE NAME (Must be	same as on Statement of Or	ganization)	J 7003 LEB 53 WW 8:
Dismel Sor T	Com Home.	,	FORM
IMPORTANT: Indicate by # type (1) Statewide/Legislative/Judge \$ (4) County Central Committee (5)	of committee you are reporting for Standing for Retention Candidate (6) City Can		DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only Comm. #
CANDIDATE COMMITTEES Candidate Name  Laty 0 11m1	ONLY:	Political Party (if applicable)	Logged In Scanned Computer W
Office Sought  I can House		District (if Senate or House)	Audited
SIGNATURE OF PERSON FIL	ING REPORT	115-244-4495 TELEPHONE	2-19-09 DATE SIGNED
CHECK IF AMENDMENT TO	port date)  D REPORT DATED  Attion) report and attach Notice of file reports until a DR-3 is file	of Dissolution Form DR-3.	cal Committees, enter Date of Election unty & Local Committees, enter County in ich Election is held
STATEM	ENT OF CASH ON HAN	D	
ASH ON HAND at the beginn committee. This amo of the last reporting p	ing of the reporting period. (T unt MUST be the same as the eriod or must be zero if this is:	otal of all funds held by the cash on hand at the end $4/8/9$ first report filed.)	89 4,623.81
ADD TOTAL MONEY	TAKEN IN THIS PERIOD		
Schedule A: Cash Co	ontributions total (Attach Sched	dule A) (*also see in-kind below)	2,100.
Schedule F: Loans R	eceived total (Attach Scheduk	∍F)	
Schedule H: Total Sa	les of Campaign Property (Att	ach Schedule H)	<u>+</u>
(Schedule H	applies to Candidates' Com	<u>amittees Only)</u> SUB-TOTAL	\$ <u>6,723.8</u>
SUBTRACT TOTAL I	MONEY SPENT THIS PERIO	•	
		) (**also see debts and loans below)	5,621. %.
Schedule F: Loan Re	payments total (Attach Schede	ule F)	<i>O</i>
ASH ON HAND at the end of	this reporting period (if final re	port balance must be zero) \$18 1077,5	\$ 1.102.55.
UNPAID BILLS (From Sched	ule D - Attach Schedule D)		s GGQ.34
		edule E)	
		ule F)	
ONSULTANT BREAKDOWN			
OUT OF THE PREATURE	(Goriednie G Attached?)		YES _X_NO

**<u>STATE COMMITTEES:</u>** Submit a reconciled campaign account bank statement in January of each year.

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

**CANDIDATE COMMITTEES ONLY:** 

#### For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Form

SCHEDULE

A

(Rev. 07/03)

CHECK THIS BOX IF

AMENDING FORM

TOTAL

COMMITTEE NAME (Must be same as on Statement of Organization)

Visney for Iour House

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE*	AMOUNT RECEIVED	√ IF FOR
(17117)	NUMBER		(if applicable)		RAISER
ı	ID#	John & Lori Le forte 4225 s.E. 16th st.		s	
10-15-08	CK# 1567	Ves Maines, IA 50320		25.00	<u> </u>
•	ID#	Donald Sheemaker			ļ
10-16-08		49 to 55 298 Ct.  Des Moines, IA 50320		25.00	L
1 - 1 - 1	ID#	George L Phyllix McGhre 505 GA St. Pl. SE		4	
10-17-08		Altoma, IA 50009		30.00	L
1	ID#	Richard Smith 4138 E university		75	
10-17-08		Des Moines IA 50317		120,€	
,	ID#	Joseph for Right to work PAC 422+ Flar Or, ste #122		A.	
C-24-08	CK# 1003	Des Acins, IA 30521		\$ 1,000.50	
1. 20	ID#	Iovans for Firedom PAC			
10-19-08	ID# CK# 1805			8 , oco. &	
}	ID#	DEGETTEN			
	CK#				
	ID#	FEB <b>2 3</b> 2009			
	CK#	Bv			
	ID#	<i>-</i>			
	CK#				
	ID#				
	CK#				
			SUB-TOTAL	7 100 1	-

TOTAL (if last page of this schedule)

Page \_\_\_\_\_ of \_\_\_\_

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, lowa 50319 Fax: 515-281-4073



Des Moines, Iowa 50319 Fax: 515-281-4073		IONS, SEE BACK OF FORM E SUMMARY PAGE	STHICS AND
COMMITTEE NAME (Must be			2008 OC 29 Abs 0.
1 /		ganzaony	FORM : FORM
IMPORTANT: Indicate by # type	Towa House of committee you are reporting for	r	DR-2 DISCLOSURE
(1)Statewide/Legislative/Judge (4)County Central Committee (5)Subdivision Candidate (8)Count (11) Local Ballot Issue	County Candidate (6 )City Car	(2) State PAC (3) State Party didate (7) School Board or Other Political of Board or Other Political Subdivision PAC	17/16
CANDIDATE COMMITTEES	ONLY:		Logged 15
Candidate Name		Political Party (if applicable)	Scanned
Larry Disney		Ke Pablican	Computer WKS WKS
Office Sought  I o wa House of Ref	ocsentatives	District (if Senate or House)	Audited 1-9-09 S
Late reports are subject to accept		515-299-9995	10-28-08
CICIATORE OF TERSON FIL	ING REPORT	TELEPHONE	DATE SIGNED
I AM FILING A 10-28-0	9 8 port date)	REPORT FOR (1) ELECTION /(	
CHECK IF AMENDMENT TO	•	·	
			ocal Committees, enter Date of Election
Check if this is final (termina	tion) report and attach Notice	of Dissolution Form DR-3.	ounty & Local Committees, enter County in
( ) ou must continue to	file reports until a DR-3 is file	ed.)	hich Election is held
		<u> </u>	
	ENT OF CASH ON HAN		
CASH ON HAND at the beginn committee. This amo of the last reporting pe	ing of the reporting period. (T unt <b>MUST</b> be the same as the eriod or must be zero if this is	otal of all funds held by the cash on hand at the end $6/B$ $4597$ first report filed.)	4569.44
ADD TOTAL MONEY	TAKEN IN THIS PERIOD	s/B 2100.	A o
Schedule A: Cash Co	ntributions total (Attach Sche	dule A) (*also see in-kind below)	<u>~</u> 1,200. <del>~</del>
Schedule F: Loans Re	eceived total (Attach Scheduk	e F)	<i>O</i>
Schedule H: Total Sa	les of Campaign Property (Att	tach Schedule H)	<u>-</u>
(Schedule H	applies to Candidates' Com	nmittees Only) SUB-TOTAL	s 6769.49
SUBTRACT TOTAL	MONEY SPENT THIS PERIOR		4
Schedule B: Expendit	ures total (Attach Schedule B	/**also soo dobte and loons heleva	5.62\.3
Schedule F: Loan Re	payments total (Attach Sched	ule F)	Ø
CASH ON HAND at the end of t	his reporting period (if final re	port balance must be zero)	58 \$ \$1.148.760
		edule E)	
		ule F)	
CONSULTANT BREAKDOWN			
ANDIDATE COMMITTEES OF	,	and the second of the second o	YES X NO
ALUE OF CAMPAIGN PROPI	<del></del>	ach Schedule H)	s &
		Johnson II)	<b>→</b> ~

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

### For Instructions, See Back of Form

#### **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

Reset Fo	SCHEDULE
	Α
	(Rev 07/03)

ı	
ı	MONETARY
ı	RECEIPTS

CHECK THIS BOX IF **AMENDING FORM** 

COMMITTEE NAME	Must be sa	ame as on Statement of Organization)	_
Disney for		= *	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
10-15-08	ID# ск#  567	John & Lori Le forte 4255 SE 16th S.T. Des Moines, IA 50320		\$25.€	INCOME
10-16-08	ck#   447	Ognald 5 hoe maker 49 70 SE 2412 Ct. Des Moines, I.4 50320		<sup>6</sup> 25.∞	
10-17-08		George & Phy Mis McGhee 505 GY St PL JE Altoona, IA 50009		#30, e	
10-17-08	'	Richard Smith 4138 Euniverlity Des Mothes IU 50317		20.00	
10-24-08	ID# 977 CK# 1003 ID# 9776 CK#	Towars for Right to Work PAC 4225 Fly Or. ste# 122 DOS Molies IA 50321		1,600.00	
10-24-08	ID#	Iowans for Freedom PAC		#000.@	
	CK#				
	CK#				
	ID# CK#				
	ID# CK#			·	

9B 2100, TOTAL (if last page of this schedule)

(for Schedule A)

<sup>\*</sup> Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
	CK THIS BOX IF

COMMITTEE NAM	ME (Must be san	me as on Statement of Organization)	_
	For Tou		

		JUL House,		
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-27-08	ID# CK# [077	Arico Systems 165 Pinecrest st. Front Royal, UA 22630	Mailing Lists	\$ 125. <u>e</u>
10-27-08	ID# CK#   078	Mail Services 4100 121 st. Whembale, IA 50323	Mailing Service and Postage	1,508.30
10-27-68		O.P. Printing 2610 Park Ave. Mascatine, IA 52761	Mailing service and Postuse	83,184.82
10-27-08	CK# \ O \ O	O.P. Printing 2610 Park Ave Mascathe, IA 52761	Mail servae al Postage	803.19
	CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			

SUB-TOTAL \$ 5,60 TOTAL (if last page of this schedule) \$ 5,60

\$ 5,621. 360

#### THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Dago	l .	۰£		
Page	 ·	of	 <u> </u>	

FOR INSTRUCT	TIONS, SEE BACK OF FORM		SCHEDULE
NOTE: Debts	NAME (Must be same as on Statement of Organization)  Ney For I awa House  previously reported that remain unpaid must be included on this ule, as well as any new obligations incurred in this period.	Reset Form	D INCURRED INDEBTEDNESS  CHECK THIS BOX IF AMENDING FORM
II TON OU)	LIGATIONS REMAINING THIS REPORTING PERIO ICLUDE LOANS SHOW LOANS ON SCHEDULE	D F)	An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.
DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS SERVICES PROVIDED OF PURCHASED	OR BALANCE OWED AT
10-20-08	O.P. Printing 2610 Park Ave Muscative, IA 52761	frinting of campai fliers.	
		SUB-T	OTAL \$
	TOTAL DEBTS OWED BY COMMITTEE AT TH	IE END OF THIS REPORTING PE	669. 3ª  669. 3ª

\*If actual figure is unknown, show "estimated" beside the figure.

CANDIDATE COMMITTEES NOTE:

\*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

Page

of. (for Schedule D)